

Statement of Congressman Gene Green
HR 3200, America's Affordable Health Choices Act
July 16, 2009

Thank you Mr. Chairman. Today, we begin work on a historic piece of legislation that will build on our current employer based health insurance system to provide quality and affordable health care to all Americans.

HR 3200, America's Affordable Health Choices Act creates a new health insurance exchange in which individuals can have access to affordable health insurance coverage from a public or private plan.

Low income individuals would be eligible for a subsidy to purchase health insurance through the exchange and people who are happy with their current employer based insurance will be able to keep their current coverage.

I am especially happy with the inclusion of a provision I have been working on for years with my fellow Texas and Florida members that will help cover the uninsured children. 12 months continuous eligibility for children in states with stand alone CHIP programs will help ensure children in states like Texas who often drop off the CHIP rolls in times of economic hardship.

These improvements to our health insurance system will help us address the health issues for the approximately 47 million Americans who are currently uninsured. Every American should have access to an affordable health insurance plan of their choice.

HR 3200 also makes changes in our health care delivery and payment system. It places an emphasis on care coordination and I am specifically pleased with the inclusion of the Community Based Medical Home Model provision in the bill.

We know there are coordinated care programs in operation in areas throughout the country, but we haven't captured the true cost saving measures of these programs on a nationwide level.

The various medical home models in this bill will help us improve the quality of care for special needs populations such as the elderly and those with chronic conditions and render cost savings.

I am also pleased with the significant investments in primary and preventive care as well as other workforce provisions in this bill.

HR 3200 would help address our primary care physician shortage by funding programs to allow for residency training in community settings such as federally qualified health centers (FQHC's).

I want to thank Mr. Sarbanes for working with our office on this provision. Giving residents the opportunity to work in our communities allows them to understand that they can make a difference by serving in the primary care field.

I am also happy we make a significant investment in the field of preventive medicine. We have a shortage of public health professionals and these individuals serve on the front lines for pandemic flu preparedness and given the impending influenza season, we need more preventive medicine professionals in our country.

I am disappointed we were unable to eliminate the 24 month disability waiting period for individuals under the age of 65 because of the enormous cost associated with this provision.

However, this bill makes many improvements and investments in our health care system so we can provide affordable health care coverage and services to all Americans.

Thank you Mr. Chairman, I look forward to marking up this bill and I yield back my time.